

Office of the Registrar  
**REGISTRATION TRANSACTION FORM**  
http://registrar.gwu.edu • registration@gwu.edu

This form must be submitted to your academic advisor or program office for approval. Students should not submit this form to the Registrar's Office.

Semester	Year
<input type="checkbox"/> Fall	_____
<input type="checkbox"/> Spring	_____
<input type="checkbox"/> Summer	_____

GWid	LAST NAME	FIRST NAME	EMAIL ADDRESS

**ADD**

CRN	SUBJECT	COURSE NUMBER	SECTION	CREDITS	TITLE	GRADE MODE*	INSTRUCTOR SIGNATURE

**DROP or WITHDRAW (please circle one)**

Must be submitted by: \_\_\_\_\_

CRN	SUBJECT	COURSE NUMBER	SECTION	CREDITS	TITLE

TIME CONFLICT APPROVAL
<input type="checkbox"/> YES <input type="checkbox"/> NO

REPEAT COURSE FOR CREDIT
<input type="checkbox"/> YES <input type="checkbox"/> NO

**\*GRADE MODE OPTIONS:**  
 A= AUDIT  
 C= LETTER GRADE  
 P= PASS/NO PASS (undergraduates only)  
 R= CREDIT/NO CREDIT (graduates only)

STUDENT LEVEL
<input type="checkbox"/> UNDERGRADUATE <input type="checkbox"/> GRADUATE <input type="checkbox"/> OTHER _____

*I request the above action be performed.*

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Student Signature \_\_\_\_\_ Date \_\_\_\_\_

AUTHORIZED SCHOOL OFFICIAL USE ONLY
<input type="checkbox"/> Prior to start of the semester   OR   Effective Date: ____ / ____ / ____
Signature: _____ Today's Date: _____

**Note:** This form cannot be used to register for a class that has a waitlist. Students will be added to the waitlist and if offered a seat, must then register through GWeb.